

## **LABORATORY DIAGNOSIS OF CHRONIC GENITOURINARY TRICHOMONIASIS**

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Genitourinary trichomoniasis (GUT) is a cosmopolitan sex-contact parasitosis. The chronic form with atypical clinic is a diagnostic problem to be identified among similar genitourinary inflammations. Trichomoniasis commonly occurs as a combined bacterial-protozoal infection (about 75% of cases are accompanied by bacterial flora and about 40% by mycoplasmal agents) (1,4). In such cases the diagnosis is not perfect and these are usually referred to the group of unknown etiology (2, 3).

The main purpose of this study is to compare the effectivity of the various laboratory methods applied in the diagnosis of chronic GUT.

A total of 55 patients (37 females and 18 males) aged from 18 to 55 years with clinical diagnosis of urethritis, cystitis, colpitis, prostatitis or vulvovaginitis have been investigated. The laboratory tests applied were native preparations for rapid diagnosis, Giemsa-stained preparations and cultural examinations using TV4 medium. The clinical specimens investigated for causative agent were urine, urethral and vaginal secretion, ejaculate. The patients have been selected after a bacteriological study. Both females and males have had various complaints originated from genitourinary system for 2 months over.

The predominant clinical diagnosis for males was urethritis (15 cases). Prostatitis was diagnosed in 2 men and cystitis - in 3.

In the female group of 37 cases, 29 were referred to colpitis and 9 to vulvovaginitis. The clinical manifestations are not discussed in this paper. All patients admitted to the investigation have been suspected for chronic GUT and therefore subjected to laboratory study comprised of all 3 tests. The purpose was to evaluate the diagnostic reliability of each test. The results are shown on fig 1.

It is demonstrated that the lowest diagnostic value is that of the native preparations - 19 positive of 55 studied (34,54%). The Giemsa-stained preparations were positive in 31 patients (56,36%), and the cultural examination was positive in 48 patients (87,27%). As it is seen the cultural method permits the most precise determination of the causative agent.

Therefore, we recommend cultural studies to be done in addition to bacteriologic tests in the diagnostic procedures in cases suspected of chronic GUT.

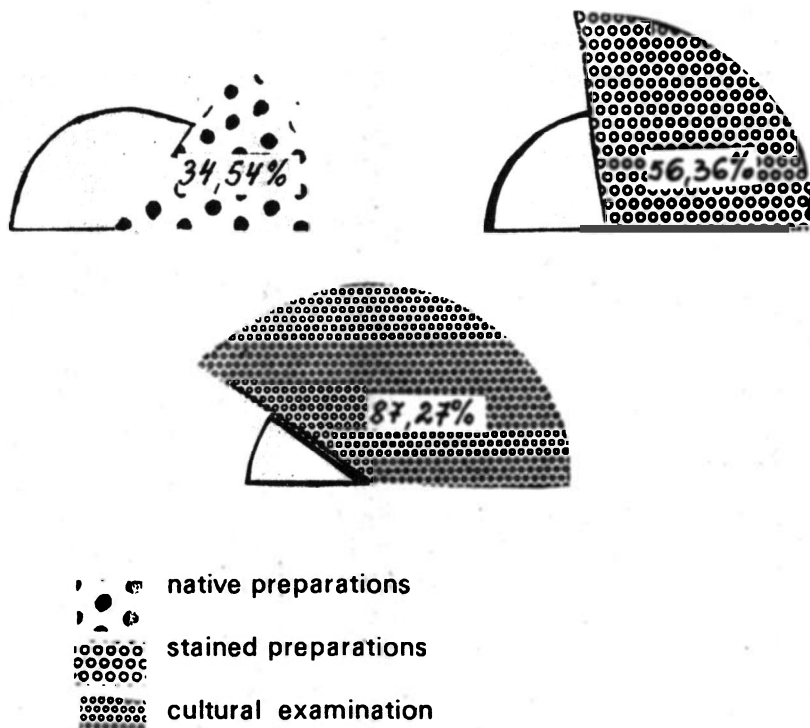


Fig 1. Reliability of the methods applied in laboratory diagnosis of GUT

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